

**Performance & Development Solutions (PDS)
Applied Management Series (AMS)**

(PLEASE PRINT)

Name: _____ SS #: _____
 Last First MI

Agency: _____ Classification: _____

Work Location: _____ Work Phone: _____

E-Mail Address: _____

FOR NON-STATE EMPLOYEES, PLEASE PROVIDE BILLING INFORMATION:

Non-State Agency/Organization: _____

Contact: _____ Phone #: _____

Address: _____ City/Zip: _____

Completion of the PDS Applied Management Series (AMS) Certificate requires the four Core Courses and all eight AMS courses listed below. Participants have three years from the enrollment confirmation date to complete the program. Core courses taken six months prior to the enrollment confirmation date can be counted toward completion of the certificate. (Exception: Core courses previously taken to complete an Achievement Certificate will be counted. Please provide the Achievement Certificate completion date below.)

Record Of Completion

Core Courses	Course #	Date Taken	AMS Courses	Course #	Date Taken
Achieving Communication Effectiveness (ACE)	GI 077	_____	Americans with Disabilities Act	NC 123	_____
Customer Service	QM 002	_____	Discipline, Grievances, & the Contracts	NC 901	_____
Ethics in the Workplace	SC 230	_____	EEO/AA: Making the Most of Your Workforce	NC 202	_____
Human Relations Skills	SC 203	_____	Family Medical Leave Act	NC 122	_____
			From Interview to Hire	NC 301	_____
			Investigating Employee Misconduct	NC 118	_____
			Performance Evaluation	NC 401	_____
			Preventing Sexual Harassment for Supervisors	NC 119	_____

If applicable, indicate Achievement Certificate completion date: ____/____/____

The following signatures indicate awareness of this application and support for completion of this certificate program within three (3) years.

_____ Employee	_____ Date	_____ Department Director	_____ Date
_____ Supervisor	_____ Date	_____ Training Liaison (State Employee Only)	_____ Date

For PDS Use Only:

Date Confirmed _____	Courses Valid Since _____
Completion Date By _____	Certificate Sent _____

Please return the completed form to:

552-0536 Rev. 9/05

State Employees: Your agency's Training Liaison

Non-State Employees: Leslie Davenport, PDS Training, DAS-HRE, 400 E 14th Street, Des Moines, IA 50319-0150

Phone: 515-281-5456 Fax: 515-242-5152